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15 dba Community Ambulance

16 **IN THE OFFICE OF ADMINSTRATIVE HEARINGS**

17 In the Matter of:

18 RBR Management, LLC dba Community
19 Ambulance,

20 Applicant.

Docket No. 2017-EMS-0104-DHS
(EMS No. 0283)

**APPLICANT'S
OBJECTIONS TO
AMR CON HOLDERS'
SUBPOENA DUCES TECUM
TO RBR/COMMUNITY
AMBULANCE**

(Assigned to the Honorable
Tammy L. Eigenheer)

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24 RBR Management LLC, dba Community Ambulance (“Applicant” or
25 “Community Ambulance”), pursuant to AAC R2-19-113, hereby objects and
26 responds to the subpoena duces tecum¹ the AMR CON Holders caused to be
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¹ Community Ambulances reserves its rights to amend, revise, and supplement its responses and objections as new and/or additional information is discovered.

1 issued to Applicant in the above-referenced matter.

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3 **Request No. 1**

4 All records/data supporting the proposition that ADHS granting
5 Community Ambulance a CON will increase competition for ambulance
6 transports of patients traveling to, from, or between Dignity Health affiliated
7 facilities (reference ADHS Ex. 1-004).

8 **Response to Request No. 1**

9 Community Ambulance objects to Request No. 1 as overly broad, vague
10 and ambiguous, and unduly burdensome. Community Ambulance further objects
11 on the grounds that documents and information relevant to the issues of public
12 necessity and whether the granting of a CON to Community Ambulance will
13 increase competition have been requested through subpoenas *duces tecum*
14 Community Ambulance directed to Intervenors and Dignity Health, and include,
15 but may not be limited to, interfacility transport arrival time reporting
16 documents showing improved performance by AMR after Community Ambulance
17 filed its Application for the CON. Subject to and without waiving these
18 objections, Community Ambulance will supplement this response if and when it
19 receives documents to its subpoenas *duces tecum* that are responsive to this
20 request.

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22 **Request No. 2**

23 All records/data supporting the proposition that granting Community
24 Ambulance a CON will “further stimulate demand for improved quality and
25 efficiency” in ambulance transport service (reference ADHS Ex. 1-004).

26 **Response to Request No. 2**

27 Community Ambulance incorporates herein by this reference its objection
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1 and response to Request No. 1.

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3 **Request No. 3**

4 All records/data relating in any way to the “innovative community health
5 service programs [Community Ambulance] intend[s] to implement,” (reference
6 ADHS Ex. 1-006).

7 **Response to Request No. 3**

8 Community Ambulance does not have documents responsive to Request
9 No. 3 at this time. Community Ambulance reserves it right to make disclosures
10 on a rolling basis up to and including the deadline for final exhibit disclosures as
11 documents responsive to this request become available.

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13 **Request No. 4**

14 All records/data supporting or establishing the reduction in healthcare
15 costs stated in your CON Application (reference ADHS Ex. 1-006).

16 **Response to Request No. 4**

17 Community Ambulance objects to Request No. 4 as unduly burdensome to
18 the extent it calls for the production of a document that is publicly and equally
19 available to AMR through Community Ambulance’s Application and ARCR, on
20 the ADHS website: [https://www.azdhs.gov/documents/preparedness/emergency-
21 medical-services-trauma-system/ambulance/ground/received-
22 applications/initial/community-ambulance/06-10-16-initial-application-part-
23 2.pdf](https://www.azdhs.gov/documents/preparedness/emergency-medical-services-trauma-system/ambulance/ground/received-applications/initial/community-ambulance/06-10-16-initial-application-part-2.pdf) (stating “Community Ambulance will not charge for disposable supplies or
24 medications) and [https://www.azdhs.gov/documents/preparedness/emergency-
25 medical-services-trauma-system/ambulance/ground/received-
26 applications/initial/community-ambulance/applicants-revised-arcr.pdf](https://www.azdhs.gov/documents/preparedness/emergency-medical-services-trauma-system/ambulance/ground/received-applications/initial/community-ambulance/applicants-revised-arcr.pdf) (showing
27 \$0 income for costs of goods sold).

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Request No. 5

All records/data that You (note definition above) are in possession of or are able to obtain from your affiliates that relate in any way to allegations of “substandard service” or “substandard performance,” if any, that you might assert in the hearing on this matter - both generally and as such allegations might relate specifically to the AMR CON Holders.

Response to Request No. 5

Community Ambulance objects to Request No. 5 as overly broad and unduly burdensome to the extent it calls for the production of documents in the possession, custody and control of AMR. Community Ambulance further objects to Request No. 5 as premature to the extent that documents relevant to the issues of public necessity and whether Intervenor AMR has demonstrated substandard service and/or substandard performance have been requested through Community Ambulance’s subpoenas *duces tecum* directed to AMR and Dignity Health. Community Ambulance cannot yet produce documents responsive to Request No. 5 until it has received responses to its subpoenas, including estimated arrival time and actual arrival time reporting and data AMR has or has provided to Dignity Health.

Subject to and without waiving its objections and reservations, Community Ambulance responds to Request No. 5 by producing the letters of support provided by Arizona General Hospital and various fire chiefs, previously disclosed as hearing exhibits CA-111-118 as responsive to this Request No. 5. Community Ambulance further reserves its right to supplement its response and disclose documents responsive to Request No. 5 on a rolling basis up to and including the deadline for final exhibit disclosures.

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Request No. 6

All records/data relating to any calculations You have done as to the financial and/or operational impact on existing ambulance transport service providers in Maricopa County in the event that Community Ambulance is granted a CON, including calculations or information regarding the impact upon the AMR CON Holders.

Response to Request No. 6

Community Ambulance objects to Request No. 6 as overly broad, vague and ambiguous and not reasonably specific as it relates to the phrase “operational impact,” and unduly burdensome to the extent it calls for the production of documents in the possession, custody and control of Intervenors, including AMR. Community Ambulance further objects to Request No. 6 as premature to the extent that documents relevant to the issues of financial and operational impact are in the possession of Intervenors and have been requested through Community Ambulance’s subpoenas directed to AMR and the other Intervenors. Community Ambulance cannot produce documents responsive to Request No. 6 until it has received responses to its subpoenas.

Subject to and without waiving its objections and reservations, Community Ambulance, identifies its ARCR, pg. 1-2 (Exhibit CA-1; ADHS-12), which shows the calculation of the anticipated number of transports and total gross revenues from those transports. Community Ambulance further reserves its right to supplement its response and disclose documents responsive to Request No. 6 on a rolling basis up to and including the deadline for final exhibit disclosures.

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Request No. 7

Records/data sufficient to identify Applicant’s intended suboperation stations (other than what is in your Application, which these requesting parties already have) and the volume of transports You expect to be done from each such sub-operation station during Applicant’s first year of operations.

Response to Request No. 7

Community Ambulance objects to Request No. 7 as it is vague and ambiguous. Subject to this objection, Community Ambulance has disclosed its suboperation stations through its Application and has no additional documents responsive to Request No. 7.

Request No. 8

Records/data sufficient to identify Applicant’s intended suboperation stations after its first year of operations, including the volume of transports You expect to be done out of each suboperation station (this includes, but it not limited to, all projections for the second and third years of operations).

Response to Request No. 8

Community Ambulance objects to Request No. 8 as overly broad and not relevant to the extent it seeks the production of documents beyond the scope of the documents ADHS requires Applicant to provide through its Application for a CON, specifically documents sought concerning Community Ambulance’s “intended suboperation stations after its first year of operations.” Community Ambulance further objects to Request No. 8 on the grounds that it calls for the production of confidential, proprietary, and trade secret information.

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Request No. 9

All records/data detailing Applicant’s anticipated need for temporary services should it receive a CON, including estimations as to number of requests and associated time frames such as day of week/time of day. (Reference ADHS Ex. 1-0063).

Response to Request No. 9

Community Ambulance objects to Request No. 9 as it is vague and ambiguous as it relates to the meaning of the term “temporary services.” Community Ambulance also objects to Request No. 9 as unduly burdensome to the extent it calls for the production of “records” and “data” related to “estimations as to number of requests and associated time frames such as day of week/time of day,” because any such “estimations” are dependent on records and data in the possession, custody, and control of AMR and potentially Dignity Health. Community Ambulance further objects to Request No. 9 as premature to the extent that Community Ambulance has requested these records and data through its subpoenas directed to AMR and Dignity Health. Community Ambulance cannot produce documents responsive to Request No. 9 until it has received responses to those subpoenas. Community Ambulance reserves its right to supplement its response and disclose documents responsive to Request No. 9 on a rolling basis up to and including the deadline for final exhibit disclosures.

Request No. 10

For your projected first and second years of operations, Records/data sufficient to specify the number of Dignity Health affiliated health care entity calls for ambulance transports You project/anticipate not being able to respond to (that other CON holders will take) and to specify the method / procedures / criteria / other you will use to determine when this will occur and/or for what calls

1 (for example, whether your operations will not be staffed during particular hours,
2 whether there are facilities you will not service, whether particular types of calls
3 will not be taken, etc.).

4 **Response to Request No. 10**

5 Community Ambulance objects to request No. 10 as overly broad, unduly
6 burdensome, vague and ambiguous, not reasonably specific, and unintelligible.
7 Community Ambulance further objects to Request No. 10 to the extent it seeks
8 records and data regarding projections for a second year of operations, which are
9 not relevant and beyond the scope of documents ADHS requires that Community
10 Ambulance provide through its Application for a CON. Community Ambulance
11 further objects to Request No. 10 on the grounds that it calls for the production
12 of confidential, proprietary, and trade secret information.

13 Community Ambulance objects to Request No. 10 as unduly burdensome
14 to the extent it calls for the production of records and data related to call volume
15 projections in the possession, custody, and control of AMR. Community
16 Ambulance further objects to Request No. 10 as premature to the extent that
17 Community Ambulance has subpoenaed data and records related to call volume
18 and transports AMR provided to Dignity Health. Community Ambulance cannot
19 produce documents responsive to Request No. 10 until it has received responses
20 to that subpoena. Community Ambulance reserves its right to supplement this
21 response and disclose documents responsive to Request No. 10 on a rolling basis
22 up to and including the deadline for final exhibit disclosures.

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24 **Request No. 11**

25 Records and/or data sufficient to identify all current Dignity Health
26 affiliated healthcare entities in Maricopa County, including these facilities'
27 locations.

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Response to Request No. 11

Community Ambulance objects to this request as overly broad and unduly burdensome to the extent it calls for the production of documents that are a matter of public record and readily available to AMR at the following page on the Dignity Health website: <https://www.dignityhealth.org/arizona/locations>.

Request No. 12

Records or data sufficient to identify all Dignity Health affiliated healthcare entities, including each such entity's location, that You anticipate may be present in Maricopa County at any time during Community Ambulance's anticipated first year of Maricopa County operations, and at any time during its expected second or third year of operations. Note each and every record that relates to this is not requested, only records sufficient to identify the specific entities, their locations, and the approximate date that they are expected to be affiliated and/or operational.

Response to Request No. 12

Community Ambulance objects to this compound request as overly broad and unduly burdensome to the extent it calls for the production of documents that are a matter of public record and readily available to AMR at the following page on the Dignity Health website: <https://www.dignityhealth.org/arizona/locations>. Community Ambulance further objects to Request No. 12 to the extent it calls for the production of records or data not in the possession, custody or control of Community Ambulance as it relates to “Dignity Health affiliated healthcare entities” that are not yet open or operational. Community Ambulance also objects on the grounds that any such information or data is likely Dignity Health’s proprietary, confidential, and trade secret information. Community Ambulance further objects to Request No. 12 as overly broad and unduly burdensome to the

1 extent it seeks the production of documents beyond the scope of what the Arizona
2 Department of Health Services (“ADHS”) requires Applicant to provide through
3 its Application for a Certificate of Necessity (“CON”), specifically documents
4 sought concerning Community Ambulance’s “expected second or third year of
5 operations.”

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7 **Request No. 13**

8 All records or data that relate to Your projected first and/or second years
9 operations plan for ambulance transports having a Dignity Health affiliated
10 entity as the patient’s destination, any separate projections/operations plan for
11 intended ambulance transfers occurring between Dignity Health affiliated
12 entities, and/or Your projections/operations plans for ambulance transports
13 originating from a Dignity Health affiliated facility.

14 **Response to Request No. 13**

15 Community Ambulance objects to request No. 13, a compound request, as
16 overly broad, unduly burdensome, and vague and ambiguous. Community
17 Ambulance further objects to Request No. 13 to the extent it seeks records and
18 data regarding projections for a second year of operations, which are not relevant
19 and beyond the scope of documents ADHS requires that Community Ambulance
20 provide through its Application for a CON. Community Ambulance further
21 objects to Request No. 10 on the grounds that it calls for the production of
22 confidential, proprietary, and trade secret information.

23 Community Ambulance further objects to Request No. 13 as unduly
24 burdensome to the extent it calls for the production of records and data related
25 to ambulance transports to, in between, and from Dignity Heath facilities that
26 are in the possession, custody, and control of AMR. Community Ambulance
27 further objects to Request No. 13 as premature to the extent that Community
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1 Ambulance has subpoenaed data and records related to transports AMR provided
2 to Dignity Health. Community Ambulance cannot produce documents responsive
3 to Request No. 13 until it has received responses to that subpoena. Community
4 Ambulance reserves its right to supplement this response and disclose documents
5 responsive to Request No. 13 on a rolling basis up to and including the deadline
6 for final exhibit disclosures.

7
8 **Request No. 14**

9 Records/data sufficient to specifically identify what Dignity Health
10 affiliated facilities you intend to provide ambulance transport services to (1)
11 during your first year of operations, (2) during your second year of operations,
12 and/or (3) after your second year. While each and every record that relates to this
13 item have not been requested, records sufficient to identify location and
14 approximate date services are projected to first relate to such location should be
15 provided.

16 **Response to Request No. 14**

17 Community Ambulance objects to Request No. 14. as overly broad and
18 unduly burdensome to the extent it calls for the production of documents that are
19 a matter of public record and readily available to AMR at the following page on
20 the Dignity Health website: <https://www.dignityhealth.org/arizona/locations>.
21 Community Ambulance further objects to Request No. 14 to the extent it seeks
22 records and data regarding projections for a “second year of operations” and “after
23 your second year” which are not relevant and beyond the scope of documents
24 ADHS requires that Community Ambulance provide through its Application for
25 a CON. Further, Community Ambulance objects to Request No. 14 to the extent
26 it seeks potentially confidential and proprietary information in the possession,
27 custody, and control of Dignity Health.

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Request No. 15

All records or data that relate to any calculations (actual or estimated) You have done as to Dignity Health affiliated entities’ need for interfacility transport services in Maricopa County, both currently and at any and all points in the future.

Response to Request No. 15

Community Ambulance objects to request No. 15, a compound request, as overly broad, unduly burdensome, vague and ambiguous, and not reasonably specific with respect to its request for Dignity Health’s need for interfacility transports “at any and all points in the future.” Community Ambulance further objects to Request No. 15 to the extent it seeks records and data that are not relevant and beyond the scope of documents ADHS requires that Community Ambulance provide through its Application for a CON. Community Ambulance objects to Request No. 15 to the extent it seeks records and data relating to calculations for the number of ALS and BLS transports identified in the ARCR on the grounds that the number of transports was based on a 2016 1st quarter report prepared by AMR and provided to Dignity Health pursuant to their Customer Agreement. Those reports are marked confidential and proprietary and are not in the possession of Community Ambulance. Subject to and without waiving this objection, Community Ambulance has issued subpoenas to Dignity Health and AMR for the production of reports and transport data, which, upon information and belief, AMR maintains and has provided to Dignity Health.

Community Ambulance further objects to Request No. 15 as unduly burdensome to the extent it calls for the production of records and data – related to ambulance transport volumes and needs for Dignity Heath facilities – in the possession, custody, and control of AMR. Community Ambulance further objects

1 to Request No. 15 as premature to the extent that Community Ambulance has
2 issued subpoenas for data and records related to interfacility transports AMR
3 provided to Dignity Health. Community Ambulance cannot produce documents
4 responsive to Request No. 15 until it has received responses to that subpoena.
5 Community Ambulance reserves its right to supplement this response and
6 disclose documents responsive to Request No. 15 on a rolling basis up to and
7 including the deadline for final exhibit disclosures.

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9 **Request No. 16**

10 Records and/or data sufficient to identify the number of patient transports
11 originating from Dignity Health affiliated facilities located in Maricopa County,
12 done by ambulance during 2016, during 2017 and done (to date) during 2018.

13 **Response to Request No. 16**

14 Community Ambulance objects to Request No. 16 to the extent it calls for
15 the production of records and/or data not in the possession, custody or control of
16 Community Ambulance. Request No. 16 is unduly burdensome because the
17 records and/or data is in the possession, custody and control of AMR (the
18 preferred provider of interfacility ambulance transports for Dignity Health
19 during the requested timeframes subject to the Customer Agreement) and/or
20 Dignity Health. Community Ambulance further objects on the grounds that this
21 information has been requested through Community Ambulance's subpoenas
22 directed to AMR and Dignity Health. Community Ambulance cannot produce
23 documents responsive to Request No. 16 until it has received responses to its
24 subpoenas.

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Request No. 17

Records and/or data sufficient to identify the number of patient transports originating from Dignity Health affiliated facilities located in Maricopa County where the patient was moved to another health care facility by non-ambulance transport (such as personal vehicle, Uber, taxi, non-ambulance medical transport or public transportation), done during 2016, during 2017 and done (to date) during 2018.

Response to Request No. 17

Community Ambulance objects to Request No. 17 to the extent it calls for the production of records and/or data not in the possession, custody or control of Community Ambulance. Request No. 17 is unduly burdensome as the records and/or data, which likely includes Protected Health Information about patients, is in the possession, custody and control of AMR (the preferred provider of interfacility ambulance transports for Dignity Health during the requested timeframes subject to the Customer Agreement) and/or Dignity Health. Community Ambulance further objects on the grounds that the records and/or data relevant to the issues of public necessity – including patients who were moved from a Dignity Health facility to another health care facility by non-ambulance transport (including patient owned vehicles) – have been requested through Community Ambulance’s subpoenas directed to AMR and Dignity Health. Community Ambulance cannot produce documents responsive to Request No. 17 until it has received responses to its subpoenas. Community Ambulance further objects to Request No. 17 on the grounds that it is overly broad and seeks documents that are not relevant insofar as the request asks for documents related to non-ambulance transports where an ambulance may not have been required or requested by the patient or Dignity Health facility.

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Request No. 18

Records and/or data sufficient to identify any and all Maricopa County Dignity Health affiliated entities' policies/rules/guidelines/checklists and/or similar documentation relating to the transfer of a patient seen at one Dignity Health affiliated facility, who is then admitted to a second Dignity Health affiliated facility, with specific regard to the method of transport that will be allowed and/or utilized. Please note this request is limited to policies/rules/guidelines/checklists, etc. in existence during calendar years 2016-2018.

Response to Request No. 18

Community Ambulance objects to Request No. 18 as it calls for the production of documents in the possession custody and control of either AMR (the preferred provider of interfacility ambulance transports for Dignity Health during the requested timeframes subject to the Customer Agreement) or Dignity Health, and that are not in the possession, custody or control of Community Ambulance.

Request No. 19

All records or data that relate to Community Ambulance's calculation of its first year's transport volume, as stated in its proforma ARCR - 11,315, including any records/data relating to the estimated volume of transports by individual transport origination location.

Response to Request No. 19

Community Ambulance objects to Request No. 19 to the extent it seeks documents supporting the calculations for the number of ALS and BLS transports identified in the ARCR on the grounds that the number of transports was based on a 2016 1st quarter report prepared by and in the possession of AMR

1 and provided to Dignity Health pursuant to their Customer Agreement. Those
2 reports are marked confidential and proprietary and are not in the possession of
3 Community Ambulance, but are in the possession of AMR and Dignity Health.
4 Further, to the extent that this request seeks documents related to the “estimated
5 volume of transports by individual transport origination location” such
6 information is not required by the Application and thus is not relevant, and calls
7 for the production of proprietary, confidential and trade secret information.

8 Subject to and without waiving this objection, Community Ambulance has
9 issued subpoenas to Dignity Health and AMR for the production of these reports
10 and transport data, which AMR maintains and may have provided, in part, to
11 Dignity Health.

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13 **Request No. 20**

14 All records or data that relate to Community Ambulance’s calculation of
15 its second and third years’ transport volume, and/or any other future years,
16 including any records/data relating to the estimated volume of transports by
17 individual transport location.

18 **Response to Request No. 20**

19 Community Ambulance objects to Request No. 20 on the grounds that it is
20 overly broad and vague and ambiguous with respect to the terms “other future
21 years” and “individual transport location.” Community Ambulance further
22 objects to Request No. 20 to the extent it calls for the production of documents
23 that are not relevant because ADHS does not require calculations of “second and
24 third years’ transport volume, and/or any other future years” to be submitted in
25 support of Community Ambulance’s Application for a CON. Further, Community
26 Ambulance objects to Request No. 20 to the extent it calls for the production of
27 proprietary, confidential and trade secret information.

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Request No. 21

Records/data sufficient to specify Applicant’s intended operations plan (including any system status or move-up plan) in the event it receives a CON, including but not limited to those items detailing intended posting locations, staffing models, and deployment plans, as those plans are expected to evolve over time (including but not limited to during the first two years of operations).

Response to Request No. 21

Community Ambulance objects on the grounds that Request No. 21 is overbroad and unduly burdensome and seeks the production of documents that are not relevant because ADHS does not require calculations of second year operations to be submitted in support of Community Ambulance’s Application for a CON. Further, Community Ambulance objects on the grounds that the production of an operations plan is premature as documents and information necessary for the development of such a plan are the subject of subpoenas to Dignity Health and AMR. Community Ambulance reserves its right to disclose an operations plan as a hearing exhibit on or before the deadline for the final witness and exhibit list.

Request No. 22

All records/data detailing Your calculations, inquiries, or other information gathering You have done in order to calculate the financial and/or operational impact of ADHS granting Community Ambulance a CON upon the ambulance transport services currently being provided to individuals living in rural and/or wilderness areas adjacent to Maricopa County, including impact upon the existing CON holders’ ability to continue serving those rural/wilderness area populations under the parameters they are currently being served (reference ADHS Ex. 3 and 4).

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Response to Request No. 22

Community Ambulance objects to request No. 22 on the grounds that it is vague and ambiguous, overly broad, unduly burdensome, and premature to the extent it calls for the production of documents that are currently subject to subpoenas issued to Intervenors and Dignity Health. Subject to those objections, Community Ambulance does not have documents responsive to Request No. 22 at this time, but reserves its right supplement this response on or before the deadline for the final witness and exhibit list.

Request No. 23

All records/data detailing Your calculations, inquiries, or other information gathering you have done in order to calculate the impact of ADHS granting Community Ambulance a CON upon the ambulance transport services currently being provided to individuals living in rural and/or wilderness areas within Maricopa County, including impact upon the existing CON holders' ability to continue serving those rural/wilderness area populations under the parameters they are currently being served (reference ADHS Ex. 3 and 4).

Response to Request No. 23

Community Ambulance objects to request No. 23 on the grounds that it is vague and ambiguous, overly broad, unduly burdensome, and premature to the extent it calls for the production of documents that are currently subject to subpoenas issued to Intervenors and Dignity Health. Subject to those objections, Community Ambulance does not have documents responsive to Request No. 23 at this time, but reserves its right supplement this response on or before the deadline for the final witness and exhibit list.

Request No. 24

All records/data relating to, identifying and/or detailing Community Ambulance's plan, in the event it receives a CON, to ensure continued ambulance

1 transport services in the rural and/or wilderness areas both in and adjacent to
2 Maricopa County in the event that Community Ambulance's entry into the
3 Maricopa County EMS system negatively impacts the current CON holders'
4 ability to maintain existing levels of service.

5 **Response to Request No. 24**

6 Community Ambulance incorporates its objections to Requests Nos. 22-23
7 herein. Community Ambulance further objects to request No. 24 as unduly
8 burdensome to the extent it calls for documents in the public record, which are
9 equally available to AMR through the ADHS website at
10 [https://www.azdhs.gov/documents/preparedness/emergency-medical-services-](https://www.azdhs.gov/documents/preparedness/emergency-medical-services-trauma-system/ambulance/ground/received-applications/initial/community-ambulance/substantive-review-response.pdf)
11 [trauma-system/ambulance/ground/received-applications/initial/community-](https://www.azdhs.gov/documents/preparedness/emergency-medical-services-trauma-system/ambulance/ground/received-applications/initial/community-ambulance/substantive-review-response.pdf)
12 [ambulance/substantive-review-response.pdf](https://www.azdhs.gov/documents/preparedness/emergency-medical-services-trauma-system/ambulance/ground/received-applications/initial/community-ambulance/substantive-review-response.pdf) (Community Ambulance's
13 Substantive Review Response). Community Ambulance further objects to
14 Request No. 24 as unduly burdensome because necessary data has been
15 subpoenaed from Intervenor and Dignity Health. Community Ambulance
16 cannot produce documents responsive to Request No. 24 until it has received
17 responses to its subpoenas. Further, Community Ambulance objects on the
18 grounds that the production of a plan is premature as documents and information
19 necessary for the development of such a plan are the subject of
20 subpoenas. Community Ambulance reserves its right to disclose a plan as a
21 hearing exhibit on or before the deadline for the final witness and exhibit list.
22

23 **Request No. 25**

24 All records/data relating in any way to your application for a CON that
25 You have provided to any person who is not an employee of Community
26 Ambulance and whom Applicant has listed as a potential witness in this matter
27 or whom it may list as a potential witness.
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Response to Request No. 25

Community Ambulance objects on the grounds that Request No. 25 is overbroad and unduly burdensome and calls for the production of documents that are not relevant. Community Ambulance further objects on the grounds that the terms “employee of Community Ambulance” is vague and ambiguous and may include Rob Richardson, Brian Rogers, and/or Jeffrey O’Malley, and calls for the production of documents protected from disclosure by the attorney-client privilege and work product doctrine.

Subject to and without waiving these objections, Community Ambulance produces non-privileged, relevant documents responsive to this request, and Community Ambulance is currently in the process of collecting documents responsive to Request No. 29 and intends to produce such documents as they are collected.

Request No. 26

All records/data relating in any way to your application for a CON that You have provided to or received from any person or entity that wrote a letter of support for your CON application to ADHS (including but not limited to those entities/individuals authoring ADHS Exs. 17 through 24).

Response to Request No. 26

Community Ambulance objects on the grounds that Request to No. 26 is overly broad, unduly burdensome, and calls for the production of documents that are not relevant and potentially protected from disclosure by the attorney-client and work product doctrine.

Subject to and without waiving these objections, Community Ambulance produces non-privileged documents in its possession responsive to this request.

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Request No. 27

All records/data evidencing or relating in any way to Your communications with the individuals authoring the letters found at ADHS Exs. 17-24 (letters of support) and/or any other person employed by the entities such individuals represent, that relate in any way to those letters or to Community Ambulance's intended services in Maricopa County. Please note this item is limited to communications occurring during the time period of January 1, 2016 through the present.

Response to Request No. 27

Community Ambulance objects to Request No. 27 on the grounds that it is overly broad, unduly burdensome and vague and ambiguous. Community Ambulance further objects to Request No. 27 to the extent this request calls for the production of documents protected from disclosure by the attorney-client privilege and the work-product doctrine.

Subject to and without waiving those objections, Community Ambulance produces non-privileged documents in its possession responsive to Request No. 27.

Request No. 28

All records and/or data relating in any way to the letter from Arizona General Hospital that has been identified as ADHS Ex. 22, including but not limited to the formation of that letter and all information provided by You to Arizona General Hospital's representatives and/or employees in connection with your CON application or the letter, including but not limited to records/data that specifically relate to any statements in that letter that might be intended to refer directly to any of the AMR CON Holders. Please note, in the event it is necessary to redact patient identifying information from these records prior to production, information sufficient to allow the AMR CON Holders to crosscheck their own

1 data base with regard to any specifically identified request for transport or
2 transport events should be provided.

3 **Response to Request No. 28**

4 Community Ambulance objects to Request No. 28 on the grounds that it is
5 overly broad, vague and ambiguous, and calls for the production of documents
6 that are in the possession, custody and control of either Arizona General Hospital
7 and/or Dignity Health, and not Community Ambulance. Community Ambulance
8 further objects to Request No. 28 to the extent this request calls for the production
9 of documents protected from disclosure by the attorney-client privilege and the
10 work-product doctrine.

11
12 **Request No. 29**

13 As it relates to your Initial Disclosure of witnesses and exhibits, all records
14 and/or data relating to, identifying, or detailing the “substandard service” stated
15 as a topic of your witness Jeff O'Malley's testimony.

16 **Response to Request No. 29**

17 Community Ambulance objects to Request No. 29 to the extent it misstates
18 the proposed testimony of Jeffrey O'Malley, which Community Ambulance
19 disclosed, in part, as follows:

20
21 Mr. O'Malley may testify regarding substandard
22 interfacility transport performance Dignity Health
23 facilities have experienced by other CON holders in the
24 proposed service area, and meetings with representatives
25 of Dignity Health hospitals, urgent care centers, and other
26 associated facilities to discuss optimization of Dignity
27 Health patient transports.

28 Community Ambulance further objects to Request No. 29 as premature to the
extent that documents relevant to the issues of public necessity and whether
Intervenor AMR or other CON Holders in the service area have demonstrated

1 substandard performance have been requested through Community Ambulance's
2 subpoenas directed to Intervenors, including AMR, and Dignity Health.
3 Community Ambulance cannot produce documents responsive to Request No. 29
4 until it has received responses to its subpoenas. Community Ambulance reserves
5 its right to supplement its response and disclose documents responsive to Request
6 No. 29 on a rolling basis up to and including the deadline for final exhibit
7 disclosures.

8 Subject to and without waiving its objections and reservations, Community
9 Ambulance identifies the letters of support provided by Arizona General Hospital
10 and various fire chiefs, previously disclosed as hearing exhibits CA-111-118 as
11 responsive to Request No. 29.

12
13 **Request No. 30**

14 As it relates to your Initial Disclosure of witnesses and exhibits, all records
15 and/or data relating to, identifying, and/or detailing the "integrated interfacility
16 transport ambulance service" that you have disclosed your witness Jeff O'Malley
17 will testify will better serve the Dignity patient population.

18 **Response to Request No. 30**

19 Community Ambulance objects on the grounds that Request No. 30 is
20 overbroad, unduly burdensome, and seeks the production of documents ADHS
21 did not require to be submitted in support of Community Ambulance's
22 Application for a CON. Further, Community Ambulance objects on the grounds
23 that the production of documents related to a plan for an integrated interfacility
24 transport ambulance service is premature as documents and information
25 necessary for the development of such a plan are the subject of subpoenas to
26 Dignity Health and AMR.

27 Subject to and without waiving these objections, Community Ambulance
28

1 reserves its right to disclose non-proprietary documents and information to
2 support a plan for an integrated interfacility transport ambulance service on or
3 before the deadline for the final witness and exhibit list.
4

5 **Request No. 31**

6 As it relates to your Initial Disclosure of witnesses and exhibits, all records
7 and/or data relating to, identifying, and/or detailing the opinions of your witness
8 Michael Evans including his opinion regarding any potential financial impact on
9 the AMR CON Holders as a result of Community Ambulance being granted a
10 CON.

11 **Response to Request No. 31**

12 Community Ambulance objects to Request No. 31 concerning W. Michael
13 Evans potential testimony “concerning the potential financial impact on other
14 CON holders in the proposed service area” as premature. Community Ambulance
15 has requested through subpoenas issued to Intervenors, including AMR,
16 documents necessary for Mr. Evans to assess the potential financial impact on
17 the CON Holders in Maricopa County. Community Ambulance cannot produce
18 documents responsive to Request No. 31 until it has received responses to its
19 subpoenas and is able to access the 2017 ARCRs for AMR.

20 Subject to and without waiving these objections, Community Ambulance
21 discloses documents it believes are responsive to Request No. 31 and anticipates
22 disclosing documents responsive to Request No. 31 as that information becomes
23 available to Community Ambulance through responses to subpoenas and
24 reserves its right to supplement its response and disclose documents responsive
25 to Request No. 31 on a rolling basis up to and including the deadline for final
26 exhibit disclosures.
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Request No. 32

As it relates to your Initial Disclosure of witnesses and exhibits, all records and/or data relating to, identifying, or detailing the expected statements and/or opinions of your disclosed witnesses Michael Evans, Robb Beery, and/or David Argue, including records/data identifying the facts / assumptions / estimations / calculations any such statements and/or opinions are based upon.

Response to Request No. 32

Community Ambulance objects to Request No. 32 as overbroad and unduly burdensome. Community Ambulance further objects to Request No. 32 as premature. Community Ambulance has requested documents through subpoenas issued to Intervenor and Dignity Health necessary for Mr. Evans, Mr. Beery, and Mr. Argue to formulate and express their anticipated opinions. Community Ambulance cannot produce documents responsive to Request No. 32 until it has received responses to its subpoenas.

Subject to and without waiving these objections, Community Ambulance discloses documents it believes are responsive to Request No. 32 for Michael Evans, and anticipates disclosing documents responsive to Request No. 32 as that information becomes available to Community Ambulance, and reserves its right to supplement its response and disclose documents responsive to Request No. 32 on a rolling basis up to and including the deadline for final exhibit disclosures.

Request No. 33

As it relates to your Initial Disclosure of witnesses and exhibits, all records and/or data identifying, detailing or otherwise relating to the “negative patient experiences” you state your witness Brandon Hestand, RN will testify to. Please note, in the event any of these relate to the AMR CON Holders and you believe it is necessary to redact patient identifying information from these records prior to

1 production, you should produce information sufficient to allow the AMR CON
2 Holders to crosscheck their own records with regard to any specifically alleged
3 request for transport or transport event.

4 **Response to Request No. 33**

5 Community Ambulance objects to Request No. 33 as unduly burdensome
6 to the extent it calls for the production of “records and/or data” in the possession,
7 custody, and control of AMR. Further, Community Ambulance objects to Request
8 No. 33 to the extent it is premature and calls for the production of documents in
9 the possession of AMR and/or Dignity Health. Community Ambulance has issued
10 subpoenas to Dignity Health and AMR for the production of documents related
11 to substandard performance and substandard service issues, which should
12 include “records and/or data” related to “negative patient experiences caused by
13 interfacility transport delays.”

14 Subject to and without waiving these objections, Community Ambulance
15 anticipates disclosing documents responsive to Request No. 33 as that
16 information becomes available to Community Ambulance through responses to
17 subpoenas, and reserves its right to supplement its response and disclose
18 documents responsive to Request No. 33 on a rolling basis up to and including
19 the deadline for final exhibit disclosures.

20 **Request No. 34**

21 As it relates to your Initial Disclosure of witnesses and exhibits, all records
22 and/or data identifying, detailing or relating to the delays in scheduling you state
23 your witness Delores Kells will testify to. Please note, in the event any such event
24 relates to the AMR CON Holders and you believe it is necessary to redact patient
25 identifying information from these records prior to production, you should provide
26 information sufficient to allow the AMR CON Holders to crosscheck their own
27 records.
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Response to Request No. 34

Community Ambulance objects to Request No. 34 as unduly burdensome to the extent it calls for the production of “records and/or data” concerning “delays the Urgent Care Centers experience in scheduling transports and in arrivals times of ambulances” that is in the possession, custody, and control of AMR. Further, Community Ambulance objects to Request No. 34 to the extent it is premature and calls for the production of documents in the possession, custody and control of AMR and/or Dignity Health. Community Ambulance has issued subpoenas to Dignity Health and AMR for the production of documents related to substandard performance and substandard service issues which should include “records and/or data” related to “delays the Urgent Care Centers experience in scheduling transports and in arrivals times of ambulances.”

Subject to and without waiving these objections, Community Ambulance anticipates disclosing documents responsive to Request No. 34 as that information becomes available to Community Ambulance through responses to the subpoenas, and reserves its right to supplement its response and disclose documents responsive to Request No. 34 on a rolling basis up to and including the deadline for final exhibit disclosures.

RESPECTFULLY SUBMITTED this 25th day of July, 2018

HENDRICKS MURPHY, PLLC

By /s/ Brendan Murphy
Brendan Murphy
3101 N. Central Ave., Suite 970
Phoenix, Arizona 85012

1 **THE MEYERSON LAW FIRM, PLC**

2 Jeffrey Meyerson
3 2555 East Camelback Road
4 Suite 140
5 Phoenix, Arizona 85016

6 Attorneys for Applicant

7
8 **ORIGINAL** filed this 25th day
9 of July, 2018 via the OAH
10 electronic document filing system
11 <https://portal.azoah.com/oedf>, with
12 copies provided to all parties on the
13 approved mailing list by posting
14 through the designated OAH website at
15 <https://portal.azoah.com/oedf/documents/2017-EMS-0104-DHS/index.html>,
16 in accordance with Case Management Order No. 1.

17
18 **COPY** of the foregoing with responsive documents
19 emailed with responsive documents
20 made available via shared link in dropbox.com
21 this 25th day of July, 2018 and
22 Copy of the foregoing with responsive document on
23 a flash drive hand-delivered before noon July 26, 2018 to:

24 Ronna L Fickbohm, Esq.
25 Fletcher Struse Fickbohm & Wagner PLC
26 6750 N. Oracle Road
27 Tucson, Arizona 85704
28 *Attorney for Intervenor AMR CON Holders*

29
30 **COPY** of the foregoing with responsive documents
31 mailed and emailed with responsive documents
32 made available via shared link in dropbox.com
33 this 25th day of July, 2018 to:

1 Paul McGoldrick
2 Shorall McGoldrick Brinkman
3 1232 E. Missouri Avenue
4 Phoenix, Arizona 85014
5 *Attorney for Intervenor AMR CON Holders*

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By: /s/ Brendan Murphy